

**CRITICAL ACCESS BEHAVIORAL HEALTH AGENCY  
DHHS ONSITE MONITORING TOOL**

<b>Name of Agency:</b>	<b>Provider #</b>	<b>CABHA Type:</b> <input type="checkbox"/> Adult <input type="checkbox"/> Child <input type="checkbox"/> SA <input type="checkbox"/> MH
<b>Name of Executive Director:</b>	<b>Continuum Services:</b>	<b>Certification Date:</b>
<b>Address of CABHA Certification Site:</b>		<b>Agency Phone Number:</b>
<b>Address of Site Review if Different from Certification Site:</b>		
<b>LME where continuum of services is located:</b>	<b>Total # of Individuals Served</b>	<b># Served in Enhanced or Residential</b>

<b>Onsite Reviewer(s):</b>			
<b>Ratings:</b>	1 = Yes/In Compliance	0 = No/Out of Compliance	9 = Not Applicable
			<b>Review Date:</b>

**For any element that is considered out of compliance, or unable to be verified, please obtain copies of appropriate documents and attach to this form.**

Leadership Positions: Medical Director	Rating	Comments
1. If the Medical Director has changed since certification, was the vacancy reported per requirements? <ul style="list-style-type: none"> <li>Name of current Medical Director:</li> <li>Date of Hire of current Medical Director:</li> <li>What was the date the vacancy occurred?</li> </ul>		
2. If granted a Medical Director exception, is there evidence that the Medical Director has taken 6 continuing medical education credits annually? INFORMATION ONLY (Does not affect final rating)		
3. Is the Medical Director an employee of or contracted directly by the CABHA?		
4. Is there evidence the 100%, 50% or 20% Medical Director provides the required administrative hours?		
5. If a 20% Medical Director also provides billable services, is there a separate contract or agreement for these services?		
6. Is there evidence the Medical Director develops communication and referral practices and collaborative relationships with the LME Medical Director?		
7. Is there evidence the Medical Director supervises, monitors and directs medical staff who may be serving the CABHA in other locations?		

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8. Is there evidence of Medical Director's involvement with individuals at high risk or with complex treatment needs?		
<b>Leadership Positions: Clinical Director</b>		
9. Is there evidence of change in Clinical Director position, was the vacancy reported per requirements?  <ul style="list-style-type: none"> <li>Name of current Clinical Director:</li> <li>Date of hire of current Clinical Director:</li> <li>What was the date vacancy occurred?</li> </ul>		
10. Is there evidence the 100%, or two 50% Clinical Director(s) provide(s) the required on-site hours?		
11. Is there evidence the Clinical Director designs and supports implementation of treatment and best practice protocols, in collaboration with the Medical Director?		
12. Is there evidence that the Clinical Director collaborates with the Quality Management/Training Director regarding development of plans and protocols for new clinical and program staff training and supervision?		
<b>Leadership Positions: Quality Management Director</b>		
13. If the Quality Management Director has changed since certification, was the vacancy reported per requirements?  <ul style="list-style-type: none"> <li>Name of current Quality Management Director:</li> <li>Date of hire of current Quality Management Director:</li> <li>Date the vacancy occurred?</li> </ul>		
14. If the Quality Management Director has changed since certification, does the current staff meet qualifications for the position?  <ul style="list-style-type: none"> <li>Degree (i.e. BS in Psychology):</li> <li>Years of Experience:</li> </ul>		

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15. If the Quality Management/Training Director position is filled by one person, is there evidence 50% of time is spent on Quality Management activities and 50% is on Training Director activities?		
16. Is the Quality Management Director involved in the quarterly evaluation and revision of the agency's QA/QI Plan?		
17. Does the Quality Management Director provide supervision and staffing for the Quality Management Committee?		
18. Does the Quality Management Director comply with regulatory requirements per 10A NCAC 22P .0405 (c)(6)?		
<b>Leadership Positions: Training Director</b>		
19. If the Training Director has changed since certification, was the vacancy reported per requirements?  <ul style="list-style-type: none"> <li>Name of current Training Director:</li> <li>Date of hire of current Training Director:</li> <li>Date the vacancy occurred?</li> </ul>		
20. If the Training Director has changed since certification, does the current staff meet qualifications for the position?  <ul style="list-style-type: none"> <li>Degree (i.e. BS in Psychology):</li> <li>Years of Experience:</li> </ul>		
21. Does the Training Director identify organizational, departmental and service training needs?		
22. Does the Training Director plan, organize and direct all training activities?		
23. Does the Training Director conduct orientation and arrange training for new employees?		
24. Is there evidence the Training Director establishes individualized training plans for staff to strengthen an employee's existing skills or teach new ones?		
25. Is there evidence the Training Director develops and offers supervisory training for staff in supervisory positions?		
26. Does the Training Director evaluate training effectiveness at least quarterly?		

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27. Is there evidence the Training Director has oversight of and implements an annual strategic training plan, including the required elements?		
<b>Integration with Physical Health Care</b>		
28. Is there evidence CABHA medical staff communicates with primary care provider for individuals served?		
<b>Core Services</b>		
29. Do staff providing core services have the required experience in the continuum area of services?		
30. Are all core services provided by the CABHA certified site?		
31. Are all core services provided by agency employed staff or directly contracted staff?		
32. Is the Medication Management Protocol implemented as written?		
33. Is the Outpatient Services Protocol implemented as written?		
34. Is the Comprehensive Clinical Assessment Protocol implemented as written?		
<b>Regulatory Compliance</b>		
35. a. Have CABHA continuum service site locations remained the same since certification? b. If "no", are they within a 35 mile radius of where core services are provided? <i>Note: verify post-review</i>		
<b>ADDITIONAL COMMENTS</b>		

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